

COUNTY OF LOS ANGELES DEPARTMENT OF AUDITOR-CONTROLLER

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May 5, 2010

TO:

Supervisor Gloria Molina, Chair

Supervisor Mark Ridley-Thomas Supervisor Zev Yaroslavsky Supervisor Don Knabe

Supervisor Michael D. Antonovich & J. Watanole

FROM:

Auditor-Controller

SUBJECT:

BEHAVIORAL HEALTH SERVICES, INC. CONTRACT COMPLIANCE

REVIEW - A DEPARTMENT OF MENTAL HEALTH SERVICE

PROVIDER

We completed a program and fiscal contract compliance review of Behavioral Health Services, Inc. (BHS or Agency), a Department of Mental Health (DMH) service provider.

Background

DMH contracts with BHS, a private non-profit community-based organization that provides services to clients in Service Planning Area 4. Services include interviewing program clients, assessing their mental health needs and developing and implementing a treatment plan. The Agency's headquarters office is located in the Second District.

DMH paid BHS on a cost-reimbursement basis between \$1.77 and \$2.28 per minute of staff time (\$106.20 to \$136.80 per hour) for services or approximately \$816.000 and \$629,000 for Fiscal Years (FY) 2007-08 and 2008-09, respectively.

Purpose/Methodology

The purpose of our review was to determine whether BHS complied with its contract terms and appropriately accounted for and spent DMH program funds providing the services outlined in the County contract. We also evaluated the adequacy of the Agency's accounting records, internal controls and compliance with federal, State and County guidelines. In addition, we interviewed Agency staff.

Results of Review

BHS maintained documentation to support the mental health services billed and staff assigned to the County contract possessed the required qualifications. However, BHS did not always comply with the County contract requirements and charged DMH \$18,964 in questioned costs. Specifically, BHS:

- Charged DMH \$12,888 for psychiatric services and \$1,076 for supplies without adequate documentation to support the charges.
- Charged DMH \$5,000 for 100% of one employee's payroll expenditures. The employee also worked on non-DMH programs.
- Did not conduct a criminal clearance for one employee assigned to the DMH program.
- Did not always complete the Assessments, Client Care Plans, Progress Notes and Informed Consent in accordance with the County contract requirements.

We have attached the details of our review along with recommendations for corrective action.

Review of Report

We discussed the results of our review with BHS and DMH. In the attached response, the Agency concurred with our recommendations and agreed to reduce their FY 2007-08 Cost Report by \$18,964. DMH indicated that they will follow-up to ensure BHS implements the recommendations in this report.

We thank BHS management for their cooperation and assistance during this review. Please call me if you have any questions or your staff may contact Don Chadwick at (213) 253-0301.

WLW:MMO:JET:DC:EB

Attachment

c: William T Fujioka, Chief Executive Officer
Dr. Marvin J. Southard, Director, Department of Mental Health
Lawrence T. Gentile, Chair, Board of Directors, Behavioral Health Services, Inc.
Henry Van Oudheusden, President/CEO, Behavioral Health Services, Inc.
Public Information Office
Audit Committee

DEPARTMENT OF MENTAL HEALTH BEHAVIORAL HEALTH SERVICES, INC. FISCAL YEARS 2007-08 AND 2008-09

BILLED SERVICES

Objective

Determine whether Behavioral Health Services, Inc. (BHS or Agency) provided the services billed in accordance with their County contract with the Department of Mental Health (DMH).

Verification

We selected 30 billings totaling 2,640 minutes from 8,225 service minutes of approved Medi-Cal billings from March and April 2008. We reviewed the Assessments, Client Care Plans and Progress Notes maintained in the clients' charts for the selected billings. The 2,640 minutes represent services provided to 25 program participants.

Results

BHS maintained documentation to support the billed service minutes. However, BHS did not always complete the Assessments, Client Care Plans, Progress Notes and Informed Consent in accordance with the County contract requirements.

Assessments

BHS did not complete Assessments in accordance with the County contract for ten (40%) of the 25 clients sampled. Specifically, one client's chart did not contain an updated Assessment and nine Assessments did not adequately describe the symptoms and behaviors exhibited by the client to support the Agency's clinical diagnosis. An Assessment is a diagnostic tool used to document the clinical evaluation of each client and establish the client's mental health treatment needs. The County contract requires Agencies to follow the Diagnostic and Statistical Manual of Mental Disorders (DSM) when diagnosing clients.

Client Care Plans

BHS did not complete the Client Care Plans in accordance with the County contract for seven (28%) of the 25 clients sampled. Specifically:

- Five Client Care Plans did not contain specific goals.
- Two client files did not contain a Client Care Plan for each type of services provided.

Progress Notes

The Agency did not complete six (20%) of the 30 Progress Notes in accordance with the County contract. Specifically, the Progress Notes reviewed did not describe what the client or service staff attempted and/or accomplished towards the clients' goals.

Informed Consent

BHS did not document Informed Consent in six (60%) of the ten client charts sampled, in which the client received treatment with psychotropic medication. Informed Consent documents the clients' agreement to a proposed course of treatment based on receiving clear, understandable information about the treatments' potential benefits and risks.

Recommendations

BHS management:

- 1. Ensure that Assessments, Client Care Plans and Progress Notes are completed in accordance with the County contract.
- 2. Ensure that Informed Consent is obtained and documented in the client's chart on an annual basis.

STAFFING LEVELS

Objective

Determine whether the Agency maintained the appropriate staffing ratios for applicable services.

We did not perform test work in this section, as the Agency did not provide services that required staffing ratios for this particular program.

Recommendation

None.

STAFFING QUALIFICATIONS

Objective

Determine whether BHS' treatment staff possessed the required qualifications to provide mental health services.

Verification

We reviewed the California Board of Behavioral Sciences' website and/or the personnel files for eight of the 17 mental health treatment staff who provided services to DMH clients during March and April 2008.

Results

Each employee in our sample possessed the qualifications required to provide the services billed.

Recommendation

None.

CASH/REVENUE

Objective

Determine whether cash receipts and revenue were properly recorded in the Agency's financial records and deposited timely in their bank account. In addition, determine whether the Agency maintained adequate controls over cash and other liquid assets.

Verification

We interviewed BHS management and reviewed the Agency's financial records. We also reviewed the Agency's July 2008 bank reconciliations for two bank accounts.

Results

BHS maintained adequate controls to ensure that cash, liquid assets and revenue were properly recorded and deposited in a timely manner.

Recommendation

None.

COST ALLOCATION PLAN

Objective

Determine whether BHS' Cost Allocation Plan was prepared in compliance with the County contract and the Agency used the Plan to appropriately allocate shared program expenditures.

Verification

We reviewed BHS' Cost Allocation Plan and selected a sample of expenditures to ensure that expenditures were appropriately allocated to the Agency's programs.

Results

BHS prepared their Cost Allocation Plan in compliance with the County contract and appropriately allocated their shared expenditures.

Recommendation

None.

EXPENDITURES

Objective

Determine whether program expenditures were allowable under the County contract, properly documented and accurately billed.

Verification

We reviewed financial records and documentation for 12 non-payroll expenditures totaling \$20,609 for July 2007 through June 2008.

Results

BHS charged DMH \$13,964 to pay for program expenditures that were not sufficiently documented. Specifically, BHS charged DMH for:

- Psychiatric services totaling \$12,888 for two subcontractors without adequate documentation to support the hours they billed BHS.
- Supplies totaling \$1,076.

During the contract year, DMH pays BHS a negotiated rate for their cost-reimbursement contract. At the end of the contract year, if the Agency's revenues exceed the actual expenditures on their Cost Report, the Agency must repay DMH for the excess amount received.

Recommendations

BHS management:

- 3. Revise their Fiscal Year (FY) 2007-08 Cost Report to reduce the reported program expenditures by \$13,964 and repay DMH for any excess amount received.
- 4. Ensure that program expenditures are supported by adequate documentation.

FIXED ASSETS

Objective

Determine whether fixed asset depreciation costs charged to the DMH program was allowable under the County contract, properly documented and accurately billed.

Verification

We interviewed staff and reviewed the Agency's accounting records related to fixed assets. In addition, we reviewed expenditures for two fixed assets that the Agency charged to the DMH program during FY 2007-08.

Results

BHS' fixed asset expenditures charged to the DMH program were allowable under the County contract, properly documented and accurately billed.

Recommendation

None.

PAYROLL AND PERSONNEL

Objective

Determine whether payroll expenditures were appropriately charged to the DMH program. In addition, determine whether personnel files were maintained as required.

Verification

We reviewed the payroll expenditures totaling \$14,836 for 11 employees charged to the DMH program for July 2008. We also reviewed their personnel files.

Results

BHS charged DMH \$8,109 in questioned costs and did not always comply with the County contract requirements. Specifically, BHS:

- Charged DMH \$5,000 for 100% of one employee's payroll expenditures. The employee also worked on non-DMH programs.
- Did not conduct a criminal clearance for one employee working on the DMH program as required by the County contract.

As indicated earlier, DMH pays BHS a negotiated rate for their cost-reimbursement contract during the contract year. At the end of the contract year, if the Agency's revenues exceed the actual expenditures on their Cost Report, the Agency must repay DMH for the excess amount received.

Recommendations

BHS management:

- 5. Provide documentation to support \$5,000 in payroll expenditures and reduce their FY 2008-09 Cost Report for non-DMH program costs.
- 6. Ensure that criminal clearances are obtained for all staff working on the County contract and maintained on file.

COST REPORT

Objective

Determine whether BHS' FY 2007-08 Cost Report reconciles to the Agency's accounting records.

Verification

We traced the Agency's FY 2007-08 Cost Report to the Agency's accounting records.

Results

The Agency's total expenditures listed on their Cost Report reconciled to the Agency's accounting records.

Recommendation

None.



The mission of BHS is to transform lives by offering hope and opportunities for recovery, wellness and independence.

American Recovery Center 909-865-2336

Boyle Heights Recovery Service Center 323-262-1786

Community Assessment Services Center 310-973-2272 (CASC)

Fast Los Angeles 323-269-4890

Hollywood Recovery Center 323-461-3161

Inglewood Recovery Center 310-673-5750

Lincoln Heights Recovery Center 323-221-1746

Medicine Education Program 310-679-9035

Pacifica House 323-734-2816

Patterns 310-675-4431

Redgate Memorial Recovery Center 562-599-8444

South Bay Recovery Center 310-679-9031

Wilmington Recovery Center 310-549-2710

All the above programs of Behavioral Health Services, Inc. have been necredited by



South Bay Senior Services 310-325-2141

Affiliates
Joint Efforts, Inc.
310-831-2358

BEHAVIORAL HEALTH SERVICES, INC.

15519 Crenshaw Boulevard, Gardena, CA 90249 310-679-9126 Fax 310-679-2920 corporate@bfs-inc.org

March 25, 2010

County of Los Angeles Department of Auditor-Controller Kenneth Hahn Hall of Administration 500 West Temple Street, Room 525 Los Angeles, CA 90012-2706

Attention: Susan Kim, CPA, CIA, Principal Accountant-Auditor-

Re: Response to Audit of Department of Mental Health Contract Fiscal Years 2007-08 and 2008-09

This letter constitutes Behavioral Health Services, Inc.'s (BHS) response and plan of corrective action in regard to the recommendations in your audit report of our contracts with the County of Los Angeles Department of Mental Health.

Recommendation 1- BHS Management shall ensure that Assessments, Client Care Plans and Progress Notes are completed in accordance with the County contract.

BHS has implemented a corrective action plan to ensure that we are in compliance with County contract requirements. BHS therapists will make sure that all Assessments, Client Care Plans, and Progress Notes are completed in accordance with requirements and placed in the client files. This will be monitored monthly by the Program Director and quarterly by the Quality Assurance Coordinator.

Recommendation 2- BHS Management shall ensure the Informed Consent is obtained and documented in the client's chart on an annual basis.

BHS has implemented a corrective action plan to ensure that we are in compliance with County contract requirements. BHS therapists will make sure that the informed consent is obtained and renewed annually in accordance with requirements and placed in the client files. This will be monitored monthly by the Program Director and quarterly by the Quality Assurance Coordinator.

Recommendation 3- BHS Management shall revise their FY 2007-08 Cost Report to reduce the reported program expenditures by \$13,964 and repay DMH for any excess amount received.

BHS will revise Fiscal Year 2007-08 Department of Mental Health Services cost report. The revised cost report will reflect a decrease of \$12,888 for

disallowed psychiatric services provided by two subcontractors without adequate documentation to support the hours billed. The revised cost report will also reflect a decrease of \$1,076 for disallowed supplies that were purchased without a supporting invoice.

Recommendation 4- BHS Management shall ensure that program expenditures are supported by adequate documentation.

Andrew Worrell, CFO, will conduct a meeting to inform the appropriate parties involved with DMH contract services, on the importance of proper supporting documentation for contract purchases, and the importance of proper supporting documentation to support billable hours. The paper work necessary for proper documentation will be reviewed, to insure all parties involved will understand the required documentation necessary to avoid future disallowances.

Recommendation 5- BHS Management shall provide documentation to support \$5,000 in payroll expenditures and reduce their FY 2008-09 Cost Report by non-DMH amounts.

BHS will revise Fiscal Year 2007-08 Department of Mental Health Services cost report. The revised cost report will reflect a decrease of \$5,000 for one employee's payroll expenditures who worked on DMH and non-DMH programs.

BHS accounting department, specifically the payroll staff, will work closely with DMH program directors, to ensure that employee's working on both DMH and non-DMH contracts are properly allocated between both contracts using accepted cost allocation methods. This will include periodic reviews to catch any change is staff assignments.

Recommendation 6- BHS Management shall ensure that criminal clearances are obtained for all staff working on the County contract and maintained on file.

BHS Human Resources department arranges for a Live Scan and criminal record clearance as part of the hiring process for positions requiring such clearance. Criminal record reports are kept by the Chief Human Resources Officer in a confidential file separate from the employee personnel file. These records will be made available to County auditors upon request.

BHS Management appreciates the technical assistance and recommendations of your department. It was a pleasure working with you during the review. Please be assured we take these recommendations seriously and will assure compliance with all County contract requirements.

Sincerely,

Teri Cannon

Chief Compliance Officer

Cc:

Henry van Oudheusden

Andy Worrell Shirley Summers Celia Aragon